

EXHIBITOR REGISTRATION FORM

2010 JOINT ANNUAL MEETING OF WSCIA/WNISA

November 15 - 16, 2010

Marcus Whitman Hotel & Conference Center, Walla Walla, WA

Organization Name _____

Person Responsible for Arrangements:

Name _____ Phone _____

Address _____

Name (s) of Additional Representatives:

Booth Fee (Includes One Single Full Registration) \$275.00 \$ _____

Number Amount

Additional Single Full Registration's _____ \$155.00 \$ _____
(Speakers, Mon. Lunch, Social & Buffet, Tues. Breakfast & Lunch)

Monday Program Only _____ \$100.00 \$ _____
(Speakers, Lunch, Social & Buffet)

Tuesday Program Only _____ \$ 70.00 \$ _____
(Speakers, Breakfast & Lunch)

I will donate money or a gift for the Daily Drawing's \$ _____

Total Amount Due \$ _____

Payable by Check (payable to WSCIA) or Credit Card (Phone 509-335-8250 with card info)

Arrangements: (please circle one)

I need a 6' skirted table with 2 chairs: YES NO

I need power: YES NO

NEW!! Please Read

Booths will need to be set up by no later than 11:00 a.m. on Monday Nov. 15th

Tear down can be done after 5:00 p.m. on Tuesday Nov. 16th